Application Data Sheet

Application Information

Contractor Grant Numbers::

Application number::	Unassigned		
Filing Date::	October 27, 2003		
Application Type::	Utility		
Subject Matter::			
Suggested classification::	class 568, 562, 564, subclass various sulfide		
	subclasses		
Suggested Group Art Unit::	1621		
CD-ROM or CD-R?::			
Number of CD disks::			
Number of copies of CDs::			
Sequence submission?::	No		
Computer Readable Form (CRF)?::			
Number of copies of CRF::			
Title::	POLYSUBSTITUTED INDAN-1-OL SYSTEMS FOR THE PROPHYLAXIS OR TREATMENT O		
	OBESITY .		
Attorney Docket Number::	38005-0187		
Request for Early Publication?::	No		
Request for Non-Publication?::	No		
Suggested Drawing Figure::			
Total Drawing Sheets::	0		
Small Entity?::	No		
Latin name::			
Variety denomination name::			
Petition included?::	No		
Petition Type::			
Licensed US Govt. Agency::	·		

Unassigned

Secrecy Order in Parent Appl.?::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Given Name::

Gerhard

Middle Name::

Family Name::

Jaehne

Name Suffix::

City of Residence::

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State or Province of Residence::

Country of Residence::

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Street of mailing address::

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City of mailing address::

Frankfurt

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address::

65929

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Given Name::

Volker

Middle Name::

Family Name::

Krone

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State or Province of Residence::

Country of Residence::

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Street of mailing address::

Zu den Eichen 25

City of mailing address::

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State or Province of mailing address::

Country of mailing address::

Germany

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Given Name::

Martin

Middle Name::

Family Name::

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Country of Residence::

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Country of mailing address::

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Applicant Information

Applicant Authority Type::

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Primary Citizenship Country::

Germany

Status::

Given Name::

Matthias

Middle Name::

Family Name::

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Name Suffix::

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State or Province of Residence::

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Postal or Zip Code of mailing address:: 20006

Phone number:: 202-912-2000

Fax Number: 202-912-2020

E-Mail address:: pgranados@hewm.com

Representative Information

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Representative Designation::	Registra	tion Number::	Representative Na	ime::
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Foreign Priority Information

Country::	Application number	:: Filing Date::	Priority Claimed::
Germany	101 42 659.3	August 31, 2001	Yes
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Assignee Information

Assignee name:: Aventis Pharma Deutschland GmBH

Street of mailing address:: 65929 Frankfurt am Main

City of mailing address:: Frankfurt

State or Province of mailing address::

Country of mailing address:: GERMANY